

## **Town of North Hempstead**

Department of Building, Safety Inspection & Enforcement 210 Plandome Road, P.O. Box 3000, Manhasset, NY 11030 Phone: 516-869-6311 Fax: 516-869-7662

## **APPLICATION FOR A SITE PLAN I SPECIAL USE REVIEW**

Building Dept. Application #			Site Plan #	Filing fee:	
			e (explain below):		•
LOCATION OF PE					
Section:	Block:	Lot(s) _		_Zoning District:	
Address:			_ City:	State: _	_ Zip:
PLEASE ATTACI					
NAME AND ADDR					
First Name:		Las	st Name:		
If Corp.:		Corp. Officer auth. to sign as owner			
Address:			City:	State:	Zip:
Email:					
NAME AND ADDE			at Nama		
		Last Name: Corp. Officer auth. to sign as owner			
			City:		
			ea of site:		
State existing use	of lot/buildings(s	5):			
Proposed use of I	ot/building(s):				
Percent of lot cov	erage for landsca	ping:	<existing< td=""><td>],</td><td> <pre>proposed</pre></td></existing<>	],	<pre>proposed</pre>
			s(s):		
Proposed Percen	tage of lot covera	ge by Parking:			
Proposed Number	er of Spaces:				

## **APPLICANT'S AFFIRMATION**

I hereby depose and say that the above statements and information contained in this application are true.

		Applicant's signature
Sworn to me this Signature of Notary Public:		
	AFFIDAVIT OF OWI	NERSHIP
State of New York } } SS: County of Nassau }		
	, being duly swo	orn, deposes and says that he/she
(Print owner's name) resides at		
fee* of all certain lots, parcel Block:, Lot(s): unincorporated area of the To Owner's Affirmation as herei	s of land shown on the at own of North Hempstead; n stated; and that I / We h	; that he I she is the owner in tached survey, Section:, situated, lying and being within the that I / We have read and understand the nereby names
as hi	s /her representative to file	e this application on his /her behalf.
		Owner's signature
Sworn to me this		, 20

<sup>\*</sup> Strike out inapplicable words